FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE 2010 JAN 19 PH 4: 03

3	FORM DR-2 (Rev. 01/98)	DISCLOSURE REPORT
	For Office Use O	aly (HTT
	Audited Computer	
1	ł	

	7	Comm.
COMMITTEE NAME (Must be same as on Statement of Organization)	- · ·	Indexed
RDH PAC # 6477		Audited
IMPORTANT: Indicate type of committee you are reporting for: 2		Computer
(1) Statewide/Legislative Candidate (2) Statewide PAG (3) State Party (4) Journal Committee		
(8) Support State of Candidates (641) 636 - 37/9		1/19/10
SIGNATURE OF TREASURER (or person fling this report) TELEPHONE	,,,,,,,,,,, ,	DATE SIGNED
SIGNATURE OF TREASURES (C. POSSESSES)		

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENT	ENCE:	
I AM FILING A January 19, 2010 REPORT FOR ANYA (1)	i) ELECTION /(2) Indicate one	
□CHECK IF AMENDMENT TO REPORT DATED		ittees, enter Date of Election cal Committees, enter County in
Check if this is final (termination) report and attach Notice of Dissolution Form DR-3. (You must continue to file reports until a Notice of Dissolution is filed.)		
STATEMENT OF CASH ON HA	ND	
CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)	\$	2886.34
or must be zero if this is first report filed.) ADD TOTAL MONEY TAKEN IN THIS PERIOD Schedule A: Cash Contributions total (Attach Schedule A) Schedule F: Loans Received total (Attach Schedule F)		/2/ SD
Schedule A: Cash Contributions total (Attach Schedule A)	***************************************	756.00
Schedule F: Loans Received total (Attach Schedule F)	, , , , , , , , , , , , , , , , , , , ,	
Schedule H: Total Sales of Campaign Property (Attach Schedule 11)		
(Schodule Hispoiles to Candidates' Committees Only)		3642.84
SUBTRACT TOTAL MONEY SPENT THIS PERIOD		29.00
Schedule B: Expenditures total (Attach Schedule B)		A
Schedule F: Loan Repayments total (Attach Schedule F)		000
CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)	s	2743.84
UNPAID BILLS (From Schedule D - Attach Schedule D)		
CONTRIBUTIONS (From Schedule E - Attach Schedule E)		
OUTSTANDING LOANS (From Schedule F - Altach Schedule F)	S	
CANDIDATE COMMITTEES ONLY:		
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES X NO
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)	\$	

_ of

(for Schedule A)

For instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

ĺ	COMMITTEE MAME (M)	et he same	e as on Statement of Organization)
I			#6477
1	V 10 (1	1/10	• • • • • • • • • • • • • • • • • • •

familial relationship, enter "not applicable" in the relationship column.

SCHEDULE A (Rev. 06/97)	MONETARY RECEIPTS
	CK THIS BOX IF NDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DO/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	VI IF FOR FUND- RAISER INCOME
10/9/09	ID# CK# 5398	Carol Van Aernam 411-W. Madison Pl Indianola, IA 50125	NA	\$ 10.00	V
10/9/09	CK# 10453	Nancy Adrianse 3210 SW 33rd Des Moines, 1A 50321	NA	25.00	V
10/9/09	CK# 5401	Amy Grant 920 N. Minnesota St. Algona, IA 50511	NA	10.00	/
10/9/09	ID# CK# 8/37	Sue Ollman 15 Charlestown Sq.	NA	71.50	V
10/9/09	CK# 8138	Sue Ollmans 5. 15 Charlestown Sg. Mason City, 14 50401	NA	20.00	~
	ID# CK#-)			
	ID# CK#				
	ID#				
	ID# CK#				
	ID# CK#				
			SUB-TOTAL	s 136.50	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marnage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no Page

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	CK THIS BOX IF NDING FORM

COMMITTE	E NAME (Must be s	same as on Statement of Organization)		
	ROM PAC	. #6477	-	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursament) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
Y15/10	ID# CK#	Wells Fargo Bank	bank fee	\$ 29.00
	ID#	Wells Fargo Bank (RDH PAC Acct.) 666 Walnut St. Des Moines, 1A 50309	i :	
	ID#			
	CK#			
	ID# CK#			
	ID#			
	ID#		i :	
	CK#			
	CK#		:	
	ID#			
			SUB-TOTAL	\$ 29.00
			TOTAL (if last page of this schedule)	

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

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Page	 or	